W-2 or FSET Customer Satisfaction Survey

Survey number   Form A   MAIL

Instructions: Please complete the questionnaire and return it in the enclosed postage-paid envelope.

1. Our records indicate that your   worker is
   Is that correct?   ☐ Yes   ☐ No

2. In the past two months, have you worked with   ☐ Yes   ☐ No

3. In the past two months, did you call
   to ask a question?   ☐ Yes   ☐ No

4. In the past two months, have you had a working answering machine, voice mail,
   someone else available, or some other means for you to receive a phone message?   ☐ Yes   ☐ No

Use a scale of 1 to 10, where "10" means "Strongly Agree" and "1" means "Strongly Disagree."
Circle the number to indicate how much you agree with each statement.

Statements 5 to 9 apply to your worker:

5. . . . returned phone calls within two business days,

Strongly Disagree									Strongly Agree
1	2	3	4	5	6	7	8	9	10

6. . . . is sincere.

Strongly Disagree									Strongly Agree
1	2	3	4	5	6	7	8	9	10

7. . . . is respectful.

Strongly Disagree									Strongly Agree
1	2	3	4	5	6	7	8	9	10

8. . . . is responsive to your needs.

Strongly Disagree									Strongly Agree
1	2	3	4	5	6	7	8	9	10

9. . . . clearly explained what programs and services were available to you and your family
   and what you had to do to get services under the   program.

Strongly Disagree									Strongly Agree
1	2	3	4	5	6	7	8	9	10

10. You were part of the process in identifying and assigning activities in which to participate.

Strongly Disagree									Strongly Agree
1	2	3	4	5	6	7	8	9	10

11. The services and activities that you received from the ENTIRE
    staff were helpful in improving your life.

Strongly Disagree									Strongly Agree
1	2	3	4	5	6	7	8	9	10

12. Thinking only of the past two months, you are satisfied overall with the service you received from
    the ENTIRE   staff.

Strongly Disagree									Strongly Agree
1	2	3	4	5	6	7	8	9	10

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